Laminin-Ab ELISA

Enzyme immunoassay for the quantitative and qualitative determination of IgG antibodies against laminin-1 in human serum.

REF RE70781

Σ 96

2-8°C

EU: IVD CE

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Instruction Manual

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1  Intended Use

Laminin-Ab ELISA is a solid phase enzyme immunoassay employing highly purified native human laminin-1 for the separate quantitative and qualitative detection of IgG antibodies against laminin-1 in human serum.

Antibodies against laminin-1 can be found in patients with recurrent abortion and infertility associated with endometriosis.

2  Clinical Application and Principle of the Assay

Laminins, multifunctional glycoproteins of the basement membrane, are involved in diverse biological activities, including the promotion of cell adhesion, migration, proliferation and differentiation, as well as the formation of the scaffolding network in basement membranes. To date, at least 15 different isoforms of laminin have been identified and are known to display tissue-specific expression during different stages of development.

Laminin-1, composed of a1, b1 and g1 chains, is the earliest synthesized network-forming component during embryogenesis and plays an important role in embryonic development, embryonic implantation and placentation. In blastocytes or early implanting mouse embryo, laminin-1 is localized in the inner cell mass and trophectoderm basement membrane. As implantation proceeds, laminin-1 is expressed in chorionic basement membrane and in Reithert’s membrane near ectoplacental cone.

Recent human studies indicate that IgG autoantibodies against laminin-1 are significantly associated with recurrent first-trimester miscarriages. In animal models, active immunization with mouse laminin-1 caused abortions in anti-laminin-1 positive mice. It was suggested that anti-laminin-1 antibodies may have a harmful effect on events at early stages of pregnancy, such as embryonic implantation, embryogenesis, placental vascularization, and/or placental nutrient transport.

Moreover recent clinical studies also showed that IgG laminin-1 antibodies are significantly associated with endometriosis in infertile patients. Thus, measurement of IgG anti-Laminin-1 autoantibodies may be a useful tool for diagnosing reproductive failure, such as recurrent abortion and infertility associated with endometriosis.

Principle of the test

Serum samples diluted 1:101 are incubated in the microplates coated with the specific antigen. Patient’s antibodies, if present in the specimen, bind to the antigen. The unbound fraction is washed off in the following step. Afterwards anti-human immunoglobulins conjugated to horseradish peroxidase (conjugate) are incubated and react with the antigen-antibody complex of the samples in the microplates. Unbound conjugate is washed off in the following step. Addition of TMB-substrate generates an enzymatic colorimetric (blue) reaction, which is stopped by diluted acid (color changes to yellow). The intensity of color formation from the chromogen is a function of the amount of conjugate bound to the antigen-antibody complex and this is proportional to the initial concentration of the respective antibodies in the patient sample.
## 3 Kit Contents

### TO BE RECONSTITUTED

<table>
<thead>
<tr>
<th>Item</th>
<th>Quantity</th>
<th>Cap color</th>
<th>Solution color</th>
<th>Description / Contents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sample Buffer (5x)</td>
<td>1 x 20ml</td>
<td>White</td>
<td>Yellow</td>
<td>5 x concentrated Tris, sodium chloride (NaCl), bovine serum albumin (BSA), sodium azide &lt; 0.1% (preservative)</td>
</tr>
<tr>
<td>Wash Buffer (50x)</td>
<td>1 x 20ml</td>
<td>White</td>
<td>Green</td>
<td>50 x concentrated Tris, NaCl, Tween 20, sodium azide &lt; 0.1% (preservative)</td>
</tr>
</tbody>
</table>

### READY TO USE

<table>
<thead>
<tr>
<th>Item</th>
<th>Quantity</th>
<th>Cap color</th>
<th>Solution color</th>
<th>Description / Contents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Negative Control</td>
<td>1 x 1.5ml</td>
<td>Green</td>
<td>Colorless</td>
<td>Human serum (diluted), bovine serum albumin (BSA), sodium azide &lt; 0.1% (preservative)</td>
</tr>
<tr>
<td>Positive Control</td>
<td>1 x 1.5ml</td>
<td>Red</td>
<td>Yellow</td>
<td>Human serum (diluted), bovine serum albumin (BSA), sodium azide &lt; 0.1% (preservative)</td>
</tr>
<tr>
<td>Cut-off Calibrator</td>
<td>1 x 1.5ml</td>
<td>Blue</td>
<td>Yellow</td>
<td>Human serum (diluted), bovine serum albumin (BSA), sodium azide &lt; 0.1% (preservative)</td>
</tr>
<tr>
<td>Calibrators</td>
<td>6 x 1.5ml</td>
<td>White</td>
<td>Yellow *</td>
<td>Concentration of each calibrator: 0, 3, 10, 30, 100, 300 U/ml. Human serum (diluted), bovine serum albumin (BSA), sodium azide &lt; 0.1% (preservative)</td>
</tr>
<tr>
<td>Conjugate, IgG</td>
<td>1 x 15ml</td>
<td>Blue</td>
<td>Blue</td>
<td>Containing: Anti-human immunoglobulins conjugated to horseradish peroxidase, bovine serum albumin (BSA)</td>
</tr>
<tr>
<td>TMB Substrate</td>
<td>1 x 15ml</td>
<td>Black</td>
<td>Colorless</td>
<td>Stabilized tetramethylbenzidine and hydrogen peroxide (TMB/H₂O₂)</td>
</tr>
<tr>
<td>Stop Solution</td>
<td>1 x 15ml</td>
<td>White</td>
<td>Colorless</td>
<td>1M Hydrochloric Acid</td>
</tr>
<tr>
<td>Microtiter plate</td>
<td>12 x 8 well strips</td>
<td>N/A</td>
<td>N/A</td>
<td>With breakaway microwells. Refer to paragraph 1 for coating.</td>
</tr>
</tbody>
</table>

*M Color increasing with concentration

### MATERIALS REQUIRED, BUT NOT PROVIDED

- Microtiter plate reader 450 nm reading filter and recommended 620 nm reference filter (600-690 nm).
- Glass ware (cylinder 100-1000ml), test tubes for dilutions.
- Vortex mixer, precision pipettes (10, 100, 200, 500, 1000 µl) or adjustable multipipette (100-1000 µl).
- Microplate washing device (300 µl repeating or multichannel pipette or automated system), adsorbent paper.

Our tests are designed to be used with purified water according to the definition of the United States Pharmacopeia (USP 26 - NF 21) and the European Pharmacopeia (Eur.Ph. 4th ed.).

## 4 Storage and Shelf Life

Store all reagents and the microplate at 2-8°C/35-46°F, in their original containers. Once prepared, reconstituted solutions are stable at 2-8°C/35-46°F for 1 month. Reagents and the microplate shall be used within the expiry date indicated on each component, only. Avoid intense exposure of TMB solution to light. Store microplates in designated foil, including the desiccant, and seal tightly.
5 Precautions of Use

5.1 Health hazard data

THIS PRODUCT IS FOR IN VITRO DIAGNOSTIC USE ONLY. Thus, only staff trained and specially advised in methods of in vitro diagnostics may perform the kit. Although this product is not considered particularly toxic or dangerous in conditions of the intended use, refer to the following for maximum safety:

Recommendations and precautions

This kit contains potentially hazardous components. Though kit reagents are not classified being irritant to eyes and skin we recommend to avoid contact with eyes and skin and wear disposable gloves.

WARNING ! Calibrators, Controls and Buffers contain sodium azide (NaN₃) as a preservative. NaN₃ may be toxic if ingested or adsorbed by skin or eyes. NaN₃ may react with lead and copper plumbing to form highly explosive metal azides. On disposal, flush with a large volume of water to prevent azide build-up. Please refer to decontamination procedures as outlined by CDC or other local/national guidelines.

Do not smoke, eat or drink when manipulating the kit. Do not pipette by mouth.

All human source material used for some reagents of this kit (controls, standards e.g.) has been tested by approved methods and found negative for HbsAg, Hepatitis C and HIV 1. However, no test can guarantee the absence of viral agents in such material completely. Thus handle kit controls, standards and patient samples as if capable of transmitting infectious diseases and according to national requirements.

The kit contains material of animal origin as stated in the table of contents, handle according to national requirements.

5.2 General directions for use

In case that the product information, including the labeling, is defective or incorrect please contact the manufacturer or the supplier of the test kit.

Do not mix or substitute Controls, Calibrators, Conjugates or microplates from different lot numbers. This may lead to variations in the results.

Allow all components to reach room temperature (20-32°C/68-89.6°F) before use, mix well and follow the recommended incubation scheme for an optimum performance of the test.

Incubation: We recommend test performance at 30°C/86°F for automated systems.

Never expose components to higher temperature than 37°C/ 98.6°F.

Always pipette substrate solution with brand new tips only. Protect this reagent from light. Never pipette conjugate with tips used with other reagents prior.

A definite clinical diagnosis should not be based on the results of the performed test only, but should be made by the physician after all clinical and laboratory findings have been evaluated. The diagnosis is to be verified using different diagnostic methods.
6 Sample Collection, Handling and Storage

Use preferentially freshly collected serum samples. Blood withdrawal must follow national requirements. Do not use icteric, lipemic, hemolysed or bacterially contaminated samples. Sera with particles should be cleared by low speed centrifugation (<1000 x g). Blood samples should be collected in clean, dry and empty tubes.

After separation, the serum samples should be used during the first 8h, respectively stored tightly closed at 2-8°C/35-46°F up to 48h, or frozen at -20°C/-4°F for longer periods.

7 Assay Procedure

7.1 Preparations prior to starting

Dilute concentrated reagents:

Dilute the concentrated sample buffer 1:5 with distilled water (e.g. 20 ml plus 80 ml).

Dilute the concentrated wash buffer 1:50 with distilled water (e.g. 20 ml plus 980 ml).

To avoid mistakes we suggest to mark the cap of the different calibrators.

Samples:

Dilute serum samples 1:101 with sample buffer (1x)
e.g. 1000 µl sample buffer (1x) + 10 µl serum. Mix well!

Washing:

Prepare 20 ml of diluted wash buffer (1x) per 8 wells or 200 ml for 96 wells
\[ \text{e.g. 4 ml concentrate plus 196 ml distilled water.} \]

Automated washing:

Consider excess volumes required for setting up the instrument and dead volume of robot pipette.

Manual washing:

Discard liquid from wells by inverting the plate. Knock the microwell frame with wells downside vigorously on clean adsorbent paper. Pipette 300 µl of diluted wash buffer into each well, wait for 20 seconds. Repeat the whole procedure twice again.

Microplates:

Calculate the number of wells required for the test. Remove unused wells from the frame, replace and store in the provided plastic bag, together with desiccant, seal tightly (2-8°C/35-46°F).
7.2 Pipetting Scheme

We suggest pipetting calibrators, controls and samples as follows:

<table>
<thead>
<tr>
<th>For QUANTITATIVE interpretation</th>
<th>For QUALITATIVE interpretation</th>
</tr>
</thead>
<tbody>
<tr>
<td>A Cal A Cal E P1</td>
<td>A NC P2</td>
</tr>
<tr>
<td>B Cal A Cal E P1</td>
<td>B NC P2</td>
</tr>
<tr>
<td>C Cal B Cal F P2</td>
<td>C CC P3</td>
</tr>
<tr>
<td>D Cal B Cal F P2</td>
<td>D CC P3</td>
</tr>
<tr>
<td>E Cal C PC P3</td>
<td>E NC PC</td>
</tr>
<tr>
<td>F Cal C PC P3</td>
<td>F NC PC</td>
</tr>
<tr>
<td>G Cal D NC P3</td>
<td>G P1 CC</td>
</tr>
<tr>
<td>H Cal D NC P3</td>
<td>H P1 NC</td>
</tr>
</tbody>
</table>

CalA: calibrator A  CalD: calibrator D  PC: positive control  P1: patient 1
CalB: calibrator B  CalE: calibrator E  NC: negative control  P2: patient 2
CalC: calibrator C  CalF: calibrator F  CC: cut-off calibrator  P3: patient 3

7.3 Test Steps

<table>
<thead>
<tr>
<th>Step</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Ensure preparations from step 7.1 above have been carried out prior to pipetting.</td>
</tr>
<tr>
<td>2.</td>
<td>Use the following steps in accordance with quantitative/ qualitative interpretation results desired:</td>
</tr>
<tr>
<td>3.</td>
<td>Pipette into the designated wells as described in chapter 7.2 above, 100 µl of either:</td>
</tr>
<tr>
<td></td>
<td>a. Calibrators (CAL.A to CAL.F) for QUANTITATIVE or</td>
</tr>
<tr>
<td></td>
<td>b. Cut-off Calibrator (CC) for QUALITATIVE interp.</td>
</tr>
<tr>
<td></td>
<td>and 100 µl of each of the following:</td>
</tr>
<tr>
<td></td>
<td>- Negative control (NC) and Positive control (PC), and</td>
</tr>
<tr>
<td></td>
<td>- Patients diluted serum (P1, P2...)</td>
</tr>
<tr>
<td>4.</td>
<td>Incubate for 30 minutes at 20-32°C/68-89.6°F.</td>
</tr>
<tr>
<td>5.</td>
<td>Wash 3x with 300 µl washing buffer (diluted 1:50).</td>
</tr>
</tbody>
</table>
### CONJUGATE

6. Pipette 100 µl conjugate into each well.

7. Incubate for 30 minutes at 20-32°C/68-89.6°F.

8. Wash 3x with 300 µl washing buffer (diluted 1:50).

### SUBSTRATE

9. Pipette 100 µl TMB substrate into each well.

10. Incubate for 30 minutes at 20-32°C/68-89.6°F, protected from intense light.

### STOP

11. Pipette 100 µl stop solution into each well, using the same order as pipetting the substrate.

12. Incubate 5 minutes minimum.

13. Agitate plate carefully for 5 sec.

14. Read absorbance at 450 nm (recommended 450/620 nm) within 30 minutes.
8  Quantitative and Qualitative Interpretation

For quantitative interpretation establish the standard curve by plotting the optical density (OD) of each calibrator (y-axis) with respect to the corresponding concentration values in U/ml (x-axis). For best results we recommend log/lin coordinates and 4-Parameter Fit. From the OD of each sample, read the corresponding antibody concentrations expressed in U/ml.

<table>
<thead>
<tr>
<th>Normal Range</th>
<th>Equivocal Range</th>
<th>Positive Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt; 12 U/ml</td>
<td>12 - 18 U/ml</td>
<td>&gt;18 U/ml</td>
</tr>
</tbody>
</table>

Example of a standard curve

Do NOT use this example for interpreting patient’s result

<table>
<thead>
<tr>
<th>Calibrators IgG</th>
<th>OD 450/620 nm</th>
<th>CV % (Variation)</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 U/ml</td>
<td>0.046</td>
<td>1.5</td>
</tr>
<tr>
<td>3 U/ml</td>
<td>0.145</td>
<td>4.4</td>
</tr>
<tr>
<td>10 U/ml</td>
<td>0.301</td>
<td>6.8</td>
</tr>
<tr>
<td>30 U/ml</td>
<td>0.609</td>
<td>9.3</td>
</tr>
<tr>
<td>100 U/ml</td>
<td>1.265</td>
<td>2.2</td>
</tr>
<tr>
<td>300 U/ml</td>
<td>2.102</td>
<td>2.8</td>
</tr>
</tbody>
</table>

Example of calculation

<table>
<thead>
<tr>
<th>Patient</th>
<th>Replicate (OD)</th>
<th>Mean (OD)</th>
<th>Result (U/ml)</th>
</tr>
</thead>
<tbody>
<tr>
<td>P 01</td>
<td>0.943/0.975</td>
<td>0.959</td>
<td>62.4</td>
</tr>
<tr>
<td>P 02</td>
<td>0.618/0.633</td>
<td>0.626</td>
<td>31.0</td>
</tr>
</tbody>
</table>

Samples above the highest calibrator range should be reported as >Max. They should be diluted as appropriate and re-assayed. Samples below calibrator range should be reported as < Min.

For lot specific data, see enclosed quality control leaflet. Medical laboratories might perform an in-house quality control by using own controls and/or internal pooled sera, as foreseen by national regulations.

Each laboratory should establish its own normal range based upon its own techniques, controls, equipment and patient population according to their own established procedures.

In case that the values of the controls do not meet the criteria the test is invalid and has to be repeated.

The following technical issues should be verified: Expiration dates of (prepared) reagents, storage conditions, pipettes, devices, photometer, incubation conditions and washing methods.

If the items tested show aberrant values or any kind of deviation or that the validation criteria are not met without explicable cause please contact the manufacturer or the supplier of the test kit.

For qualitative interpretation read the optical density of the cut-off calibrator and the patient samples. Compare patient’s OD with the OD of the cut-off calibrator. For qualitative interpretation we recommend to consider sera within a range of 20% around the cut-off value as equivocal. All samples with higher ODs are considered positive, samples with lower ODs are considered negative.

Negative: \[ \text{OD patient} < 0.8 \times \text{OD cut-off} \]

Equivocal: \[ 0.8 \times \text{OD cut-off} \leq \text{OD patient} \leq 1.2 \times \text{OD cut-off} \]

Positive: \[ \text{OD patient} > 1.2 \times \text{OD cut-off} \]
9 Technical Data

Sample material: serum
Sample volume: 10 µl of sample diluted 1:101 with 1x sample buffer
Total incubation time: 90 minutes at 20-32°C/68-89.6°F
Calibration range: 0-300 U/ml
Analytical sensitivity: 1.0 U/ml
Storage: at 2-8°C/35-46°F use original vials only.
Number of determinations: 96 tests

10 Performance Data

10.1 Analytical sensitivity

Testing sample buffer 30 times on Laminin-Ab ELISA gave an analytical sensitivity of 1.0 U/ml.

10.2 Specificity and sensitivity

The microplate is coated with highly purified native human laminin-1. No crossreactivities to other autoantigens have been found.

10.3 Linearity

Chosen sera have been tested with this kit and found to dilute linearly. However, due to the heterogeneous nature of human autoantibodies there might be samples that do not follow this rule.

<table>
<thead>
<tr>
<th>Sample No.</th>
<th>Dilution Factor</th>
<th>Measured (U/ml)</th>
<th>Expected (U/ml)</th>
<th>Recovery (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1 / 100</td>
<td>169.0</td>
<td>165.0</td>
<td>102.4</td>
</tr>
<tr>
<td></td>
<td>1 / 200</td>
<td>83.9</td>
<td>82.5</td>
<td>101.7</td>
</tr>
<tr>
<td></td>
<td>1 / 400</td>
<td>40.4</td>
<td>41.3</td>
<td>97.8</td>
</tr>
<tr>
<td></td>
<td>1 / 800</td>
<td>19.5</td>
<td>20.6</td>
<td>94.7</td>
</tr>
<tr>
<td>2</td>
<td>1 / 100</td>
<td>51.9</td>
<td>52.0</td>
<td>99.8</td>
</tr>
<tr>
<td></td>
<td>1 / 200</td>
<td>24.0</td>
<td>26.0</td>
<td>92.3</td>
</tr>
<tr>
<td></td>
<td>1 / 400</td>
<td>11.9</td>
<td>13.0</td>
<td>91.5</td>
</tr>
<tr>
<td></td>
<td>1 / 800</td>
<td>6.8</td>
<td>6.5</td>
<td>104.6</td>
</tr>
</tbody>
</table>

10.4 Precision

To determine the precision of the assay, the variability (intra and inter-assay) was assessed by examining its reproducibility on three serum samples selected to represent a range over the standard curve.

<table>
<thead>
<tr>
<th>Intra-assay</th>
<th>Inter-assay</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sample No.</td>
<td>Mean (U/ml)</td>
</tr>
<tr>
<td>1</td>
<td>175.0</td>
</tr>
<tr>
<td>2</td>
<td>56.0</td>
</tr>
<tr>
<td>3</td>
<td>18.0</td>
</tr>
</tbody>
</table>

10.5 Calibration

Due to the lack of international reference calibration Laminin-Ab ELISA is calibrated in arbitrary units (U/ml).
11 Literature


Symbols / Symbole / Symbôles / Símbolos / Σύμβολα

<table>
<thead>
<tr>
<th>REF</th>
<th>Cat.-No.: / Kat.-Nr.: / No.- Cat.: / Cat.-No.: / N.° Cat.: / N.–Cat.: / Αριθμός-Κατ.:</th>
</tr>
</thead>
<tbody>
<tr>
<td>LOT</td>
<td>Lot-No.: / Chargen-Bez.: / No. Lot: / Lot-No.: / Lote N.°: / Lotto n.: / Αριθμός -Παραγωγή:</td>
</tr>
</tbody>
</table>

Use by: / Verwendbar bis: / Utiliser à: / Usado por: / Usar até: / Da utilizzare entro: / Χρησιμοποιείται από:


CONC | Concentrate / Konzentrat / Concentré / Concentrar / Concentrado / Concentrato / Συμπύκνωμα |
LYO | Lyophilized / Lyophilisat / Lyophilisé / Liofilizado / Liofilizado / Liofilizzato / Λυοφιλιασμένο |

IVD | In Vitro Diagnostic Medical Device. / In-vitro-Diagnostikum. / Appareil Médical pour Diagnostics In Vitro. / Equipamento Médico de Diagnóstico In Vitro. / Dispositivo Medico Diagnostic In vitro. / Ιατρική συσκευή για In-Vitro ∆ιάγνωση. |

Evaluation kit. / Nur für Leistungsbewertungszwecke. / Kit pour évaluation. / Juego de Reactivos para Evaluación. / Kit de evaluación. / Kit Αξιολόγησης. |

Read instructions before use. / Arbeitsanleitung lesen. / Lire la fiche technique avant emploi. / Lea las instrucciones antes de usar. / Leggere le istruzioni prima dell’uso. / Διαβάστε τις οδηγίες πριν την χρήση. |

Keep away from heat or direct sun light. / Vor Hitze und direkter Sonneneinstrahlung schützen. / Garder à l’abri de la chaleur et de toute exposition lumineuse. / Manténgase alejado del calor o la luz solar directa. / Manter longe do calor ou luz solar directa. / Να φυλάσσεται μακριά από θερμότητα και άμεση επαφή με το φως του ηλίου. |

Store at: / Lagern bei: / Stocker à: / Almacene a: / Armazenar a: / Conservare a: / Αποθήκευση στους: |

Manufacturer: / Hersteller: / Fabricant: / Productor: / Fabricante: / Fabbricante: / Παραγωγός: |

Caution! / Vorsicht! / Attention! / ¡Precaución! / Cuidado! / Attenzione! / Προσοχή! |

Symbols of the kit components see MATERIALS SUPPLIED.

Die Symbole der Komponenten sind im Kapitel KOMPONENTEN DES KITS beschrieben.

Voir MATERIEL FOURNI pour les symbôles des composants du kit.

Símbolos de los componentes del juego de reactivos, vea MATERIALES SUMINISTRADOS.

Para símbolos dos componentes do kit ver MATERIAIS FORNECIDOS.

Per i simboli dei componenti del kit si veda COMPONENTI DEL KIT.

Για τα σύμβολα των συστατικών του κιτ συμβουλευτείτε το ΠΑΡΕΧΟΜΕΝΑ ΥΛΙΚΑ.

COMPLAINTS: Complaints may be submitted initially written or vocal. Subsequently they need to be filed including the test performance and results in writing in case of analytical reasons.

WARRANTY: The product is warranted to be free from material defects within the specific shelf life and to comply with product specifications delivered with the product. The product must be used according to the Intended use, all instructions given in the instructions for use and within the product specific shelf life. Any modification of the test procedure or exchange or mixing of components of different lots could negatively affect the results. These cases invalidate any claim for replacement.

LIMITATION OF LIABILITY: IN ALL CIRCUMSTANCES THE EXTENT OF MANUFACTURER’S LIABILITY IS LIMITED TO THE PURCHASE PRICE OF THE KIT(S) IN QUESTION. IN NO EVENT SHALL MANUFACTURER BE LIABLE FOR ANY INCIDENTAL OR CONSEQUENTIAL DAMAGES, INCLUDING DAMAGES FOR LOST PROFITS, LOST SALES, INJURY TO PERSON OR PROPERTY OR ANY OTHER INCIDENTAL OR CONSEQUENTIAL LOSS.

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